

**APPLICATION FOR SUMMER TERM EMPLOYMENT**

Return to: [StudentHiringMinesBranch@gov.nl.ca](mailto:StudentHiringMinesBranch@gov.nl.ca)    Deadline: March 14, 2026

Surname	First Name	Other Name
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1 <sup>st</sup> Address (while attending university):			2 <sup>nd</sup> Mailing Address (where you can be reached after end of term):			
City or Town:			City or Town:			
Province:	Postal Code:	Phone No.:	Province:	Postal Code:	Phone No.:	Cell Ph. No.:
Email Address:			Secondary Email Address:			

POSITION SOUGHT:	Summer Student <input type="checkbox"/>	Choice 1	Choice 2
AREA OF INTEREST:			

AVAILABILITY	Period available (give precise dates, please take into consideration any field school/summer courses you have to take) From: _____ To: _____		
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TECHNICAL AND PRACTICAL SKILLS		Canadian Driver's License? YES: <input type="checkbox"/> NO: <input type="checkbox"/> CLASS: _____	Firearms Possession License? YES: <input type="checkbox"/> EXPIRY DATE: _____ NO: <input type="checkbox"/>
ATV Training? YEAR OBTAINED:	YES: <input type="checkbox"/> NO: <input type="checkbox"/>	Can you swim? Pleasure Craft Operator card YES: <input type="checkbox"/> NO: <input type="checkbox"/> YES: <input type="checkbox"/> NO: <input type="checkbox"/>	Can you repair small engines? YES: <input type="checkbox"/> NO: <input type="checkbox"/>
First Aid Training? COURSE: EXPIRY:	YES: <input type="checkbox"/> NO: <input type="checkbox"/>	Other Safety Related Courses? YEAR: COURSE:	Camping Experience? YES: <input type="checkbox"/> NO: <input type="checkbox"/> Can you use a canoe? YES: <input type="checkbox"/> NO: <input type="checkbox"/> Mapping Experience? YES: <input type="checkbox"/> NO: <input type="checkbox"/>

Computer Skills: (SELECT the number best representing your knowledge 1 being the lowest and 5 the highest, remember you may be asked to explain your experience in the interview) WORD SPREADSHEETS DATABASES GIS (e.g., ArcGIS) OTHER: _____					
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What is your experience under bush conditions? (State precise periods spent, location, and nature of experience, including any experience in pitching tents, constructing bush camps, docks, cooking, etc.) Use an additional page(s) if necessary.

Leisure, extra-curricular and other interests and activities. Mention any relevant skills in this section.

List clubs or organizations you belong to.

Reason(s) for seeking employment with the Geological Survey.

EDUCATION - High School and Undergraduate		A current transcript must be attached with your email submission (Both unofficial and official transcriptions will be accepted)	
Name of High School, Collegiate, or Technical School:			Year Completed:
Name of Undergraduate College or University:		Current Year of Study in Earth Science /Geography/Environmental Science: (e.g., 3)	Major Subject: Minor Subject:
Overall Average:	Scholarships awarded (give dates):		
Returning to school in fall of 2026: YES: <input type="checkbox"/> NO: <input type="checkbox"/>			

**EDUCATION - Postgraduate**

Name of University:	Year of Study: (e.g., 1)	Specialization:
List Graduate Degree(s) Obtained:		Year Graduate Degree(s) Obtained:
Title(s) of Postgraduate Thesis:		
Name(s) of supervisor(s) or faculty advisor(s) on thesis or postgraduate work:		
Other courses, certificates, (business, etc.) with year obtained:		
Scholarships or fellowships awarded (give dates):		
	Returning to school in fall of 2026: YES: <input type="checkbox"/> NO: <input type="checkbox"/>	

**RANK YOUR GEOSCIENCE INTERESTS (Use dropdown menus to select top three choices)**

1.	2.	3.	Other:
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**PREVIOUS WORK EXPERIENCE (start with most recent)**

Employer (Name):	City:	Phone:
Supervisor (Name and Phone Number if different from above):	FROM: (month) (year)	TO: (month) (year)
Position and Duties:		

Employer (Name):	City:	Phone:
Supervisor (Name and Phone Number if different from above):	FROM: (month) (year)	TO: (month) (year)
Position and Duties:		

Employer (Name):	City:	Phone:
Supervisor (Name and Phone Number if different from above):	FROM: (month) (year)	TO: (month) (year)
Position and Duties:		

**REFERENCES (Please provide three - DO NOT list relatives)**

Name:	Occupation:	Phone (Business):
		Phone (Residence):
Name:	Occupation:	Phone (Business):
		Phone (Residence):
Name:	Occupation:	Phone (Business):
		Phone (Residence):

**WORK STATUS**

Are you currently working?	NO: <input type="checkbox"/>	FULL TIME: <input type="checkbox"/>	PART TIME: <input type="checkbox"/>	MUCEP: <input type="checkbox"/>	GRADSWEP: <input type="checkbox"/>
Are you currently legally entitled to work full time in Canada?	YES: <input type="checkbox"/>	NO: <input type="checkbox"/>			

I authorize you to obtain references from my past  present  employer(s).

**NOTE:** - Applicants must 1) currently be a post-secondary student AND 2) be returning to an undergraduate or graduate program in Fall 2026  
- Geological field programs may be conducted in remote areas for extended periods of time. Duties may involve strenuous manual labour and walking long distances over rugged terrain, boat work, and the use of ATVs, planes and helicopters. This may include long days and working outside of normal working hours depending on the task and weather.

By submitting this application, I hereby certify that all statements made in this application are true and complete to the best of my knowledge and belief. It is understood that the employer may, at any time, take such steps as seen fit to verify the information on this form and I hereby consent thereto. I further agree that a natural omission, withholding or misrepresentation with respect to this information may be cause for denial or immediate termination of any employment offered or accepted. Under the authority of the Access to Information and Protection of Privacy Act, 2015 (ATIPPA, 2015), personal information is collected in order to process, manage and issue the programs or services of the Department of Industry, Energy and Technology. Personal information is kept confidential as required by ATIPPA, 2015, but may be released under request in accordance with ATIPPA, 2015. If you have questions pertaining to the collection, use and/or disclosure of this information please contact the ATIPP Coordinator at 729-0463.

For Office Use:	
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